

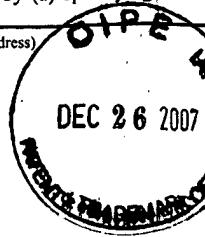
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590                    10/05/2007  
**James J Napoli**  
**Marshall Gerstein & Borun**  
**6300 Sears Tower**  
**233 South Wacker Drive**  
**Chicago, IL 60606-6357**



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

James J. Napoli	(Depositor's name)
<i>James J. Napoli</i>	(Signature)
<i>26 December 2007</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/088,113	03/15/2002	Juerg Lareida	000364.00124	8075

TITLE OF INVENTION: MEDICAMENT FOR TREATMENT OF NEUROPATHIES 12/27/2007 SSESHE2 00000019 10088113

01 FC:1501                    1440.00 DP  
02 FC:1504                    300.00 DP  
03 FC:0004                    00.00 DP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440.00	\$0	\$0	\$1740.00	01/07/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
KIM, JENNIFER M	1617	514-252160

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1Marshall,  
2Gerstein &  
3Borun LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Lilly ICOS LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Wilmington, Delaware

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *James J. Napoli*

Date 21 December 2007

Typed or printed name James J. Napoli

Registration No. 32,361

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